PAPT B - FEE(S) TRANSMITTAL

Complete and send this form, together with apphasole fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

appropriate. All further indicated unless correct maintenance fee notifica	correspondence includi- ed below or directed of tions.	ng the Pate herwise in	nt, advance o Block 1, by (correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Foc(5) Transmittat. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
26304								
KATTEN MUCHIN ROSENMAN LLP 575 MADISON AVENUE NEW YORK, NY 10022-2585					Certificate of Mailing or Transmission I bereby certify that is Feel Stransmittal is being deposited with the United States Fostal Service with sufficient coaster for first class mail in an envelope addressed to the Mail Stop ISSUE Feel address above, or being facisimale transmitted to the USPTO (371) 275-2885, owhen date indicated below.			
Customer Num			(Depositor's name)					
			(Signature)					
								(Swell)
APPLICATION NO.	FILING DATE		FIRST NAMED INVE		ATTORNEY DOCKET NO		RNEY DOCKET NO.	CONFIRMATION NO.
10/747,669	10/747,669 12/29/2003		Fusasuke Gotoh		KAM 17.895B		1565	
TITLE OF INVENTION	: BALL BEARING				(100799-00090		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1	1440	\$300	\$0		\$1740	07/15/2008
EXAM	ART UNIT		CLASS-SUBCLASS					
JOYCE, WILLIAM C			682	384-528000				
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363). (1) the pages of the to 3 printing detect of the page								u1-1-
Change of correspo	(1) the names of up to 3 registered patent attorneys of agents OR, alternatively,							
☐ Change of correspondence address (or Change of Corresponden Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form								
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required.				registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PR	RINTED ON T	THE PATENT (print or ty	ne)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
recordation as set form in 57 C.F.R.3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
NSK Ltd. Tokyo								
Please cbeck the appropriate assignee category or categories (will not be printed on the patent):								
		categories (win not be pr	inted on the patenty.	muviduai ACC	троганс	on or other private grou	ip entity Government
4a, The following fec(s) are submitted: 4b, Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)								
Susue Fee A A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.								
								iciency, or credit any extra copy of this form).
5. Change in Entity Stat	us (from status indicated	l shove)		overpayment, to Depo	sit Account Numbe	150	(enclose an	extra copy of this form).
	SMALL ENTITY statu		FR 1.27.	☐ b. Applicant is no long	er claiming SMAI	L ENT	ITY status, See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requeeords of the United State	ired) will n		from anyone other than the Office.				
	1 = 1							
Authorized Signature	/ nasten A	· Shaki	/		Date0	0/24/	2008	
Typed or printed name					Registration N			
This collection of informs an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	ation is required by 37 C. iality is governed by 35 application form to the principal for reducing this buringinia 22313-1450. DO 3-1450.	FR 1.311. T U.S.C. 122 USPTO. Ti den, sbould NOT SENI	he information and 37 CFR 1 ime will vary be sent to the D FEES OR C	n is required to obtain or n 1.14. This collection is est depending upon the indivended in the collection of the Chief Information Office COMPLETED FORMS TO	etain a benefit by the mated to take 12 m idual case. Any co- r, U.S. Patent and THIS ADDRESS	ne publication in utes in ments in tradema. SEND	c which is to file (and to complete, including on the amount of tim ark Office, U.S. Depar TO: Commissioner for	by the USPTO to process) gathering, preparing, and e you require to complete tment of Commerce, P.O. or Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.